

STATE OF MONTANA  
DEPARTMENT OF PUBLIC HEALTH  
W. F. COGSWELL, M. D., SECRETARY

HEALTH REVIEW

March 16, 1927.

The wood tick season will soon be here. Physicians are requested to be on the lookout for the diseases which may be transmitted by the wood tick, namely, spotted fever, tularaemia and tick paralysis. Our records show that spotted fever has occurred in 32 of the 56 counties of the State. Last year we had 36 cases reported with 15 deaths.

Typical cases of spotted fever are not difficult of diagnosis, particularly if there is a history of tick bite. Physicians are requested to report all cases promptly to the local or county health officer who will report to the State health department.

Tularaemia, a comparatively recently described disease, is perhaps more difficult of diagnosis. There are several different types of this disease, the most common being the typhoid type, which to some extent simulates typhoid fever and possibly in times past has been so diagnosed. Then there is the glandular type, which is characterized by the large glands near the seat of the tick bite. The bite in these cases sometimes causes an ulcer which is difficult to heal.

Tularaemia is a disease of the rabbit and may be transmitted to humans by means of the wood tick or personal contact with such diseased rabbits. Several cases of severe eye infection due to this disease have been reported in Montana, due to the patients having rubbed their eyes with their hands after handling the infected rabbit. Last year there were 23 cases of tularaemia reported, mostly in the eastern part of the State.

Tick paralysis does not occur so frequently as the other two diseases, but as a rule we have one or two cases reported each year. This is generally found in children. The symptoms simulate to some extent infantile paralysis. If the tick is found and removed early the patient invariably recovers, but if the tick is not removed the disease terminates fatally. Tick paralysis is more common in the northwestern part of the State, where no cases of spotted fever or tularaemia have ever been reported.

Laboratory. The last legislature appropriated \$60,000 for the construction of a laboratory in the Bitter Root Valley for spotted fever work. Proper facilities will be provided in this laboratory for the U. S. Public Health Service to manufacture the Spencer-Parker vaccine for the prevention of spotted fever. Part of the space in the laboratory will be set aside for tick parasite work which is being conducted by the State Board of Entomology. The State Board of Entomology is required by law to select the site and take charge of the construction of the building.

Ample appropriations were given the State Board of Entomology to carry on the tick parasite work. If this parasite can be acclimated in Montana, it offers a chance of freeing the State of the wood tick.

CURRENT DISEASE STATISTICS.

	Reported for weeks ending	
	March 5,	March 12.
Tuberculosis,	0	3
Typhoid fever,	0	1
Smallpox,	24	8
Diphtheria,	13	5
Scarlet fever,	144	93
Measles,	66	42
Whooping cough,	4	0
Chickenpox,	53	14
Mumps,	37	18
Cerebro-spinal meningitis (epidemic)	6	9
Other diseases,	6	1

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